

Donor Milk and Informal Milk Sharing- Topic of the Month

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This Topic of the Month was written with University of Minnesota Public Health Nutrition (MPH) graduate student Isabelle Smiley.

Human milk is an ideal first food for baby and healthy for the parent. Babies who are fed human milk receive immunological factors and nutrients that are unavailable in infant formula. Donor human milk is one option to provide an infant nutrition when their parent's milk isn't available. Read this month's memo to learn more about the benefits, concerns, misconceptions, and barriers to acceptance of donor human milk. Plus learn about cultural considerations related to donor milk in the Muslim community.

Support

When a family has questions about donor milk, breastfeeding, pumping, or milk sharing, the information in this memo can help to inform both staff and participants. WIC's role is to support participants who ask about the use of donor milk by providing them with evidence-based information and referring them to their health care provider for additional guidance. WIC staff can offer culturally responsive care that respects the unique experiences and needs that families may have.

WIC competent professional authorities, designated breastfeeding experts, and breastfeeding peers, can offer support and resources to help parents learn more about their feeding options and if needed, refer to their health care provider or a local milk bank to access donor milk.

Benefits

Preterm infants can benefit greatly from human milk in the early days. Infants who were fed preterm formula were almost nine times more likely to develop necrotizing enterocolitis than those who were fed parent's own milk or donor milk. Preterm infants fed human milk are also at reduced risk for other infections and sepsis compared to those who receive preterm formula.

For nearly all health outcomes, human milk is better for the infant than cow's-milk or plant-based formula.

Pasteurized donor human milk

There may be confusion about the differences between pasteurized donor human milk, parent's own (pumped) milk, unpasteurized breastmilk from another nursing parent,

sometimes called informal milk sharing, and wet nursing. The two most common forms of donor milk are pasteurized donor human milk and informal milk sharing.

Regulated human milk banks provide access to pasteurized donor human milk for infants in need, including very low and low birth weight infants and babies in the NICU. The Human Milk Bank Association of North America, the largest distributor of pasteurized donor human milk in America, screens donors, then pools, tests, and heat treats the milk via pasteurization so it can be distributed to infants in need. Pasteurization has been shown to eliminate harmful bacteria yet can also slightly change some of the nutritional components of human milk. Studies find that pasteurized donor human milk is still the safest source of human milk when the parents own milk is not available.

Many families are unaware of the extensive measures taken by milk banks to ensure that pasteurized donor human milk is safe for even the most fragile infants. At Human Milk Bank Association of North America-affiliated milk banks, donors follow an intensive screening process including:

- Donors are screened for HIV, HTLV, hepatitis C and B, Creutzfeldt-Jakob disease, and syphilis. They are also asked questions regarding their social history including use of tobacco products, illegal drugs, or medications.
- Samples of donated milk are sent to a microbiology and serology lab and further tested for pathogens and any other potentially harmful substances.
- At the time of screening, donors receive education on when to stop donating milk either temporarily or permanently due to changes in their circumstances.

A Human Milk Bank Association of North America milk bank will maintain a close relationship with the donor during the whole donation period and encourage them to report any changes in lifestyle and recent illnesses.

Informal milk sharing

Although no formal definition exists, informal milk sharing is the sharing of breastmilk that *does* not occur through regulatory facilities such as human milk banks or hospitals. Informal milk sharing is an increasingly popular practice around the U.S., often facilitated via the internet or in community-based settings. It may be donation based or sold for profit.

Informally shared milk is *not screened for potential harms* such bacterial contamination, the presence of drugs, or adulteration with non-human-milk liquids, such as cow's milk. When milk is sold for profit, donors are less likely to be transparent about their health and social practices, compared to the community-based informal milk sharing practices.

Some parents may ask about an alternative to formula such as informal milk sharing. WIC can support these parents by giving them information regarding the potential risks and alternatives to support their choice. Additionally, if a family shares that they are using milk obtained through informal milk sharing risk code 411I should be assigned and education documented (See the WIC 411 Inappropriate Nutrition Practices for Infants section 411I for more information).

The American Academy of Pediatrics (AAP), Food and Drug Administration (FDA), and the Academy of Breastfeeding Medicine (ABM) recommend against using human milk purchased over the internet or independently. (See the Resources for staff to consider section for links to these recommendations.)

Fatwa and milk kinship

For Muslims, there may be cultural factors that contribute to a family's refusal of pasteurized donor human milk, even when medically indicated. In Islam, there is a long tradition of wet nursing, where a woman who is not the biological parent is paid to nurse an infant, as the Prophet himself was wet nursed. However, with wet nursing comes a milk kinship. Those who have received breastmilk from the same woman become siblings, and therefore cannot marry. Since donors in the United States are anonymous, Muslim families are concerned their child who receives this donor milk could someday unwittingly marry a milk sibling or that the milk may not be Halal.

For these reasons informal milk sharing is often more acceptable than pasteurized donor human milk. However, this is not a safe option for preterm infants who would benefit most from pasteurized donor human milk in the hospital.

In November of 2023, a fatwa (a legal ruling on a point of Islamic law declared by a recognized authority) was issued by the Minnesota Islamic Council affirming the acceptability of infants receiving pasteurized donor human milk. Fatwas in the past have focused on only allowing donor milk for therapeutic/medicinal purposes; the Minnesota Islamic Council stated that the use of heat-treated donor milk aligns with Islamic law to prioritize preservation of a human life (Brighter Health MN, 2023). Leaders hope that this change will allow more Muslim families to consider the use of pasteurized donor human milk when it is needed.

If a Muslim participant asks about the use of donor milk, it may be helpful to share what you know about the safety of donor milk and if you feel comfortable, what you have read about the fatwa. Acknowledge concerns that they may have and then refer them to their health care provider for more information and support.

Resources for staff to consider:

WIC Breastfeeding Support (U.S. Department of Agriculture (USDA) WIC Breastfeeding Support)

<u>WIC 411 Inappropriate Nutrition Practices for Infants</u> - 411E & 411I Provides references to use of donor human milk acquired directly from individuals or the Internet. (MDH WIC)

<u>Minnesota Milk Bank for Babies</u>- A milk bank is a facility which processes donor human milk for distribution to medically fragile infants.

<u>Academy of Breastfeeding Medicine's 2017 position statement on informal breast milk sharing for the term healthy infant</u> (ABM Position Statement, *Breastfeeding Medicine* 2018)

<u>Policy Statement: Breastfeeding and the use of Human Milk</u> (American Academy of Pediatrics (AAP), 2022)

Use of Donor Human Milk (United States Food & Drug Administration (FDA) March 22, 2018)

<u>Looking for Pasteurized Donor Human Milk for your baby?</u> (Minnesota Milk Bank for Babies)

<u>Pasteurized and unpasteurized donor human milk</u> (Canadian Paediatric Society, Updated Fe. 8, 2024)

Fatwa (Minnesota Milk Bank for Babies)

References- complete listing of hyperlinks:

WIC Breastfeeding Support (wicbreastfeeding.fns.usda.gov/)

Minnesota Milk Bank for Babies (www.mnmilkbank.org/)

Fatwa (www.mnmilkbank.org/resources/fatwa/)

Academy of Breastfeeding Medicine's 2017 position statement on informal breast milk sharing for the term healthy infant

(abm.memberclicks.net/assets/DOCUMENTS/ABM's%202017%20Position%20Statement%20on%20Informal%20Breast%20Milk%20Sharing%20for%20the%20Term%20Healthy%20Infant.pdf)

Policy Statement: Breastfeeding and the use of Human Milk

(https://publications.aap.org/pediatrics/article/150/1/e2022057988/188347/Policy-Statement-Breastfeeding-and-the-Use-of)

Use of Donor Human Milk (www.fda.gov/science-research/pediatrics/use-donor-human-milk)

WIC 411 Inappropriate Nutrition Practices for Infants

(www.health.state.mn.us/people/wic/localagency/riskcodes/411.html)

Pasteurized and unpasteurized donor human milk

(https://cps.ca/documents/position/pasteurized-and-unpasteurized-donor-human-milk#:~:text=Heating%20in%20pasteurization%20can%20significantly,bacteria%2C%20thereby %20suppressing%20their%20growth.)

Looking for Pasteurized Donor Human Milk for your baby?

(https://www.mnmilkbank.org/receive-milk/)

Minnesota Department of Health - WIC Program, 625 Robert St N, PO BOX 64975, ST PAUL MN 55164-0975; 1-800-657-3942, health.wic@state.mn.us, www.health.state.mn.us; to obtain this information in a different format, call: 1-800-657-3942.

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